

An Ounce of ...

HELLO, EVERYONE. I HOPE that 2007 has been good to you and that 2008 will be even better. It is with that thought in mind that I would like to “talk” to you for a few minutes about some things you should consider doing for your airmen.

September was National Prostate Cancer Awareness Month, October was National Breast Cancer Awareness Month, November is National Lung Cancer Awareness Month, and there are other months throughout the year that are associated with other life-threatening conditions.

It is wonderful that our society has stepped up the heat in preventing, detecting, and curing these diseases, and these month-long campaigns have



certainly helped to raise everyone's awareness. But, unfortunately, the diseases do not confine themselves to their assigned month, and they are all capable of “striking” at any time.

While the diseases themselves are more than enough for anyone to have to cope with, our airmen have to deal with another issue: their flying status. Some of them love flying so much that they ignore or deny symptoms because they are afraid that reporting these problems could lead to their being grounded.

This reluctance could have serious health consequences. For example, if prostate cancer is discovered early, it can be treated, and an airman can be back to flying in as little as six weeks.

Other cancers can also be treated, and while it may take longer than six weeks to get back to flying, the ultimate outcome can still be a cure and return to flying. However, if a cancer is not discovered and treated early, and if it is allowed to grow and spread, the treatment will have to be much more radical — and the results are much more likely to be disastrous.

Many airmen regularly see a primary care physician, and they come to you only for their Federal Aviation Administration (FAA) flight physical. In other cases, you are both

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their primary care provider and their aviation medical examiner.

A third group of individuals do not see a doctor on a regular basis except for their required FAA examination, and they do not expect their AME to do anything more than the minimum required to secure their medical certificate.

I worry about the airmen in this third category because they are the ones who are most likely to be walking around with an undiagnosed illness.

Besides the individual problems an airman would suffer associated with such an illness, the safety of the national airspace, and the safety of the airman and his or her passengers could be directly affected if a particular illness or condition were to result in an aircraft mishap.

Regardless of which category your airmen fall into, please take some time to discuss prevention with them. Just a couple of minutes have the potential to completely change a person's life and, quite possibly, affect aviation safety as well.

Think about the wonderful service you will be providing, and think how good you will feel when an airman tells you that, based on your discussion, he or she took the extra steps that led to an early detection and cure!

I wish you all a very safe and happy holiday season, and I look forward to reaping the “pounds” in 2008.

— Fred

Federal Air Surgeon's Medical Bulletin

Library of Congress ISSN 1545-1518

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The Federal Air Surgeon's Medical Bulletin is published quarterly for aviation medical examiners and others interested in aviation safety and aviation medicine. The Bulletin is prepared by the FAA's Civil Aerospace Medical Institute, with policy guidance and support from the Office of Aerospace Medicine. An Internet on-line version of the Bulletin is available at: www.faa.gov/library/reports/medical/fasmb/

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AAM-400

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